

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 60

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Citizens for Tom Petri

A. Full Name (Last, First, Middle Initial)
Amy Katz

Mailing Address 9801 Lakeshore Road

City State Zip Code
Newton WI 53063-9521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dermatology Associates of WI Information Requested

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2011

Transaction ID : A-C46165

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Robert Manglitz

Mailing Address PO Box 2334

City State Zip Code
Holland MI 49422-2334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lake Michigan Carferry Partner

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
834

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2011

Transaction ID : A-C46164

Amount of Each Receipt this Period

834

C. Full Name (Last, First, Middle Initial)
Mr. and Mr Philip C. Olsson

Mailing Address 3519 Lowell Street NW

City State Zip Code
Washington DC 20016-5026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OFW Law Attorney

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2011

Transaction ID : A-C46097

Amount of Each Receipt this Period

250

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2084.00
